

MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION SECTION OF SPECIAL EDUCATION PROGRAM DEVELOPMENT

DETERMINATION OF NEED FOR EDUCATIONAL SURROGATE APPOINTMENT

DESE USE ONLY	
Approved	
Disapproved	
Comments	

NOTE: TO BE COMPLETED BY LOCAL EDUCATION AGENCY (Complete all items)

STUDENT INFORMATION	REFERRING DISTRICT
Name	- District Name
Social Security Number Date of Birth	
Residential Facility	
Contact Person/Title	
Street	Phone Number
CityStateZip_	
Phone Number	
SCHOOL ATTENDING	CASEMANAGER INFORMATION
	Name
Name of District	Agency Name
Street	Street
City State Zip	
Phone Number_	
Please ✓ as appropriate. 1. The student's educational status: the student has been referred for a special education evaluation the student receives special education and related services. 2. The district has determined, after reasonable efforts, that: parent(s) cannot be identified. whereabouts of parent(s) are unknown. Other: Other: DFS DFS DYS Family Court DMH 4. Court papers/documentation appointing guardianship are:	If assignment of specific Educational Surrogate is preferred, indicate name of surrogate below:
maintained by the district in the student's file not maintained by the district but have been reviewed by district.	rict personnel
5. The student resides with Parent/guardian Foster parent Other: This information submitted herein is true and	complete to the best of my knowledge.
Submitted this day of	
Signature	Date

RETURN TO Keep a copy for your records Catherine Leiweke, Educational Surrogate Program
Department of Elementary and Secondary Education
Special Education Compliance
P.O. Box 480, Jefferson City, MO 65102

Phone #: 573-526-7605 Fax #: 573-526-5946

The Missouri Department of Elementary & Secondary Education ensures equal employment/educational opportunities/affirmative action regardless of race, color, creed, national origin or sex, in compliance with Title VI & Title IX, or disability, in compliance with Section 504 and the Americans With Disabilities Act.